



LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH
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MARVIN J. SOUTHARD, D.S.W.
Director

ROBIN KAY, Ph.D.
Chief Deputy Director

RODERICK SHANER, M.D.
Medical Director

April 30, 2013

Dear LPS Designated Facility Administrator:

Enclosed is the revised official *LPS DESIGNATION GUIDELINES AND PROCESS FOR FACILITIES WITHIN LOS ANGELES COUNTY* (Sixth Edition) ["LPS Designation Guidelines"] governing the LPS designation of both facilities and staff in Los Angeles County, which are now effective. The document may be appropriate for review by the facility management staff, psychiatric admitting attending staff, inclusive of those approved to write seclusion and restraint orders, and all professional staff members privileged by the facility and authorized by the Los Angeles County Department of Mental Health ["LAC DMH"] to initiate involuntary holds at your facility and off-site, including Psychiatric Emergency Team ["PET"] members, if applicable.

A "Summary of Revisions to LPS Designation Guidelines (6th Edition)" is attached listing the changes to the LPS Designation Guidelines, along with the associated reasons. Highlights of the changes include:

1. Additions to the Guidelines regarding documentation required with a 5151 assessment in an LPS designated facility that results in the release of an individual initially detained by LAC DMH PMRT or authorized staff of LAC DMH directly operated or contracted programs.
2. Addition requiring LPS designated Urgent Care Centers accepting patients detained on a 5150 to complete a risk assessment for each patient, contact the 5150 originator if a decision is made not to admit the client, and document the basis for determining the release of clients who were detained as a danger to self or others.
3. Changes that reflect LAC DMH interpretation of detention status under WIC 5150/5151 to be independent of any previous episodes of 5150, regardless of contiguity.
4. Changes to reflect LAC DMH interpretation of WIC 5150/5151 as defining the beginning of seventy-two hours of detention under WIC 5150 at the time of admission to an LPS designated facility, pursuant to the 5151 evaluation.
5. Addition of a requirement that, when an involuntarily admitted individual meets certain criteria (including three or more previous hospitalizations under 5250 within the last twelve months by reason of grave disability), an LPS designated facility must either request an LPS conservatorship investigation by the LAC Public Guardian, or explicitly state in the clinical record the reason for not doing so.
6. Updating of the PMRT-PET Partnership Ten Point Plan to reflect current practice.
7. Addition of an FAQ regarding detention under WIC 5150, to address changes in LAC DMH procedures related to 72 hour detentions.

LPS Designated Facility Administrator
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I appreciate your continued partnership in ensuring that responsibilities related to LPS designation are properly discharged within Los Angeles County.

Sincerely,



Marvin J. Southard, D.S.W.
Director

MJS:RS:mc

Enclosures

c: Robin Kay, Ph.D., Chief Deputy Director
Roderick Shaner, M.D., Medical Director
Stephanie Jo Reagan, Principal Deputy County Counsel
Jaime Garcia, Regional Vice President, HASC
Eric Stone, Program Manager, Health Facilities Inspection Division
Connie Draxler, Deputy Director, Office of the Public Guardian
Mary Williams, Director, Patients' Rights Office

SUMMARY OF REVISIONS TO LPS DESIGNATION GUIDELINES (6th Edition)

PAGE(S)	CHANGE	PURPOSE OF CHANGE
6	I.B.1.n – The clinical record associated with a 5151 assessment in an LPS designated facility that results in the release of an individual initially detained by LAC DMH PMRT or authorized staff of LAC DMH directly operated or contracted programs, must include documentation of the probable cause for detention recorded on the 5150 application, and the reason the 5151 evaluator felt that the cause (and other written clinical information provided with the 5150 application by the PMRT or program staff) did not suffice to require a clinical decision to continue involuntary detention.	Added to ensure recording of key elements of assessment and resultant decision-making
6-7	I.B.1.p and I.B.1.p.1) - LPS designated Urgent Care Centers accepting patients detained on a 5150 must complete a risk assessment for each patient. 1). LPS designated UCCs receiving patients on 5150s must refer to all documentation received with the 5150 in the risk assessment, reflect the consideration of the documentation received in the decision to admit the client, contact the 5150 originator if a decision is made not to admit the client, and document the basis for determining the release of clients who were detained as a danger to self or others.	Added to ensure recording of key elements of assessment and resultant decision-making
7	I.B.1.q – LAC DMH considers detention status under WIC 5150/5151 to be independent of any previous episodes of 5150 regardless of contiguity. [Also See Appendix L].	Added to conform with LAC DMH interpretation of WIC 5150/5151
7	I.B.1.r – LAC DMH considers the seventy-two hours of detention under WIC 5150 to begin at the time of admission to an LPS designated facility, pursuant to the 5151 evaluation. [Also See Appendix L (FAQs)].	Added to conform with LAC DMH interpretation of WIC 5150/5151
7	I.B.1.y through I.B.1.y.4) – In instances in which an involuntarily admitted individual meets all of the following criteria, an LPS designated facility must either request an LPS conservatorship investigation by the LAC Public Guardian, or explicitly state in the clinical record the reason for not doing so. 1). Current detention under 5250 by reason of grave disability. 2). Finding of probable cause for detention by the Court. 3). Three or more previous psychiatric hospitalizations under 5250 within the last twelve months by reason of grave disability. 4). Current diagnosis of schizophrenia, schizoaffective disorder, or mood disorder with psychotic features. [Also See Appendix C].	Added to reflect July 2012 recommendations of a Work Group (LPS Conservatorship Investigation Application Work Group) focused on criteria for requesting conservatorship investigation by LAC Public Guardian)
9	I.C.6 – The facility meets requirements of TJC or of an approved equivalent agency for orientation and training of agency personnel, if utilized.	Changed to reflect name changes for The Joint Commission and to include other accrediting agencies
9	I.D.1.a – [Policies and Procedures] --Electroconvulsive treatment; psychosurgery or deep brain stimulation (if performed at the facility);	Added to address use of deep brain stimulation as a psychosurgical procedure
13	II.A.5 – The facility ensures that the involuntary detention authority granted to a member of the professional staff of the designated facility is exercised at the facility only in relation to the professional staff member's responsibilities in conjunction with that facility. (See Appendices J and K).	Added to clarify that LPS authorization related to membership on the professional staff of an LPS designated facility is limited to activities in connection with that facility

SUMMARY OF REVISIONS TO LPS DESIGNATION GUIDELINES (6th Edition), continued

PAGE(S)	CHANGE	PURPOSE OF CHANGE
14	II.A.7.c – Defer evaluations for purposes of determining and executing involuntary psychiatric hospitalization (WIC 5585) for children and adolescents who are dependent (DCFS) and wards of the court (Juvenile Probation population) in Los Angeles County to LAC DMH Psychiatric Mobile Response Team (PMRT) 5150 detention authorized staff. Restricted settings include, but are not limited to, hospitals, foster, group, and family homes, and schools. (See Appendices J and K).	Added to clarify that LPS authorization related to membership on the professional staff of an LPS designated facility does not extend to minors in certain settings
19	III.A.8 – The recommendation is submitted to the State Department of Social Services.	Changed to reflect dissolution of the State Department of Mental Health and assumption of responsibility for LPS designation by the State Department of Social Services
37, 38	Appendix H – AWOLs without return: # Vol.____; # Invol.____[Attach Report]	Added to further define what is to be reported by designated facilities (i.e., detailed information on elopement of involuntarily detained patients)
43	Appendix J – PMRT-PET Partnership: Ten Point Plan – July 2011 3. PET may develop contractual agreements with medical hospital emergency rooms in all Service Areas for purposes of conducting 5150 evaluations for indigent, Medi-Care, and Medi-Cal beneficiaries. 4. PET will provide Emergency Outreach Bureau (EOB) with a list of medical hospital emergency rooms in which they have a contractual agreement to provide 5150 assessments. PET may provide assessments in hospital floors or units.	Replaces Nine Point Plan of February 2011. Point #3 allows agreements with medical hospital ERs in <u>all</u> Service Areas. New Point #4 requires PETs to submit a list of their ER agreements to EOB.
44	Appendix K – Operational Grid for LAC-Permitted 5150 Activity for 5150 Detention Authorized Individuals --Private Mobile PET (Own ER & contracted ERs only) --Authorized Hospital Staff With Admitting Privileges --Authorized Members of Hospital Staff Without Admitting Privileges Or Mobile Resources --Mental Health Psychiatrist in Directly Operated Facility/ Client Location: Program-Specific Sites (Program-specific exceptions as arranged)	Grid was revised 3/18/13 as noted below: --Added contracted ERs to Designated Hospital ER locations where PET activity is permitted --Replaces Authorized Physicians terminology --Replaces Authorized Hospital Staff (Not physicians, not mobile) terminology --Added to reflect that LAC DMH psychiatrists are authorized during their work in DMH directly operated programs to detain individuals under WIC 5150 at Program-Specific Sites (Program specific exceptions as arranged), in instances in which probable cause for such detention exists
45-48	Appendix L – Memo, dated December 21, 2012, on Frequently Asked Questions (FAQs) Regarding Detention Under Welfare and Institutions Code (WIC) 5150; and, FAQs regarding changes in LAC DMH procedures related to WIC 5150 detention, dated 2013-03-21	Added to answer frequently asked questions regarding detention under WIC 5150, and to address changes in LAC DMH procedures related to 72 (seventy-two) hour detentions under WIC 5150

4/25/2013